

City of Sunnyvale

Child Care Provider "Wish List" Form

Instructions: Please type or print clearly. Please fax or mail your completed form by **December 31, 2006** to: Youth, Family & Child Care Resources, 603 All America Way, Sunnyvale, CA 94088-3707. **Fax:** (408) 730-7696. If you would like an email copy of this form, please email your request to childcareresources@ci.sunnyvale.ca.us . Thank you!

1) Name of Child Care: _____

2) Type of Child Care: _____

3) State of California License Number: _____

4) Contact Person: _____

5) Telephone Number: _____

6) Email Address: _____

RESOURCE NEEDED	COST	How this will improve your child care program?

Please be sure to let us know if your wish has been granted at 408-730-7608.